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Northern Virginia Long-Term Care Ombudsman Program

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UPDATE

Serving the City of Alexandria and the Counties of Arlington, Fairfax, Loudoun, and Prince William through their Area Agencies on Aging.

Managing the assaultive resident and countering rising emotions.

When a resident threatens harm to himself or to others, the stress can trigger strong emotional responses. You may not be able to keep a resident from losing control, but you can minimize the stress precipitated by the assaultive resident if you are prepared.

There are six suggested guidelines to follow in managing assault:

- Recognize that physical aggression represents an attempt to achieve security and control; therefore intervention should strengthen the resident's sense of responsibility, comfort, and safety.
- Avoid taking a resident's verbal or physical attacks personally. Staff are convenient targets for pent-up emotions.
- Physical struggle is always a time-limited event. Its intensity cannot be sustained indefinitely. The struggle will

subside. Staff's task is to minimize the risk of injury to both the resident and the staff.

- Recognize staff teamwork. Use planned sequential techniques to intervene.
- Recognize that effective management of the assault begins by accurately evaluating the situation and what needs to be done. Avoid reacting impulsively. Get help. Avoid physical struggle alone. Make a plan. When the team is assembled, clearly describe the plan.
- **6** Use the following techniques aimed at diminishing the intensity of emotions (there are rising levels of emotion for both the resident and the staff).

Techniques to counter the effects of rising levels of emotion

Psychologically disarm the resident. Acknowledge the resident's distress. Establish your role as ally, not enemy. Never joke or make light of the

situation.

Direct the attention of the

participants, both the staff and the resident. People have difficulty paying attention, therefore, communicate using the person's name (hearing one's name is an attentiongetter).

Give directions for behavior. Use specific statements to tell resident what to do. For example, "Mr. Jones, let go of my arm."

Communicate clearly and concisely. Use short, simple statements. Economy of language is essential in managing any emotionally-charged situation.

Communicate

Expectations. Make clear to the resident what behavior is required of him. This can increase his sense of security and control. For example, "Mr. Jones, I expect you to maintain control. If you can't we are here to prevent injury."

Avoid arguing or defending. Offer explanations in a matter-of-fact way.

Modulate voice tone. Adjust your tone according to

the resident's stage of emotional intensity. A softer than normal tone can be effective in gaining the resident's attention and in de-escalating the situation in mild to moderate levels. In emotional levels that are severe, a louder than normal tone voice and slower speech can gain attention. Do not shout, as this is stimulating. If emotions have erupted, use a normal and monotonous tone, making bland, repetitious statements.

Avoid threatening body language, clenched fists, hands on hips, etc. Avoid tense or angry facial expressions. Avoid quick movements. Adopt a posture that communicates composure and a desire to assist the resident.

Respect personal space.

Uninvited intrusion into the personal space surrounding one's body is perceived as threatening and may provoke physical aggression. Seek the resident's permission to enter his personal space, if possible. (Reprinted with permission from Eymann Publications, Inc., specializing in newsletters related to geriatric caregiving and issues of aging, ALZHEIMERS CARE GUIDE is available for \$28 for a one-year subscription, 12 issues. Call or write for a subsciption or sample copies to Eymann Publications, INC. PO Box 3577, Reno, NV 89505, 800-354-3371.)

VOLUNTEER OMBUDSMEN NEEDED

We are looking for people who are empathetic, diplomatic and skilled communicators to be Volunteer Ombudsmen. These applicants must successfully complete the training program and must be available for 4 hours per week during regular business hours.

The volunteer ombudsman is assigned to a specific nursing home or assisted living facility where he or she becomes familiar with the residents and staff. Using the skills of listening, observing and mediating, the ombudsman acts as an advocate, ensuring that the residents' rights are protected.

The ombudsman **empowers** residents to speak up on their own behalf and helps them with problems within the home that they cannot solve alone.

The ombudsman also **intervenes** with the staff for residents who have dementia and /or have lost the ability to communicate.

The following are examples of issues that volunteers have dealt with in the past year: inadequate help to eat or drink; staff shortages; unsanitary care practices; nurse-calling devices out of reach; lack of meaningful or appropriate activities; building safety hazards; lack of menu choices; missing personal belongings.

Often the volunteer ombudsmen were able to

identify creative solutions to problems that were adopted by the facility staff.

The September training program will address such issues as residents' rights; the long-term care system; the long-term care resident's health profile; working with confused residents; interviewing skills, and complaint handling and resolution.

The Ombudsman Program is funded by the City of Alexandria and the Counties of Arlington, Fairfax, Loudoun and Prince William through their Area Agencies on Aging. The goal of the program is to promote the highest possible quality of life for recipients of long-term care.

Call Nancy today for further information

324-5435

Training will be September 15, 16 and 24 from 9 a.m. to 4:30 p.m.